

U.S.S.N. 09/885,157 (9/14/04) - 2

Please charge the Petition fee to Deposit Account No. 50-0831.

Respectfully submitted,



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September 14, 2004

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PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE
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7590 03/05/2004
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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

KANDACE BROWN (Depositor's name)
Kandace Brown (Signature)
4-13-04 (Date)

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 09/883,157 | 06/21/2001 | Sagarika A. Chavan | DP-303983 | 3949 |

TITLE OF INVENTION: SPEECH RECOGNITION HANDLING WITH SYNTHESIZED MANUAL INPUT EVENTS

| APPL. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|----------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | NO | \$1330 | \$300 | \$1630 | 06/07/2004 |

| EXAMINER | ART UNIT | CLASS-SUBCLASS |
|----------------------|----------|----------------|
| MCFADDEN, SUSAN IRIS | 2655 | 704-270000 |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

STEFAN V. CHMIRLEWSKI

3. ASSIGNER NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNOR
DELPHI TECHNOLOGIES, INC.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)
TROY, MI 48098

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

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☒ Advance Order - # of Copies 2

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Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature) *Kandace Brown* (Date) 9-13-04
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PTOL-85 (Rev. 11/03) Approved for use through 04/30/2004.

PAGE 615 * RCVD AT 9/13/2004 2:14:01 PM [Eastern Daylight Time] * SVR:USPTO-EFAXF-22 * DNS:7463258 * CSID:248 813 1211 * DURATION (mm-ss):02:42

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